

# APPLICATION FOR SERVICE - HIBBING PUBLIC UTILITIES

NAME OR BUSINESS NAME \_\_\_\_\_

DATE \_\_\_\_\_

SPOUSE OR CONTACT PERSON \_\_\_\_\_

CUSTOMER NUMBER \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

HOME OWNER VERIFICATION <input type="checkbox"/>
RENTER <input type="checkbox"/>
DEPOSIT \$ _____

PHONE 1 \_\_\_\_\_ PHONE 2 \_\_\_\_\_ PHONE 3 \_\_\_\_\_

SOCIAL SECURITY # OR D.L. \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_

DEPOSIT PAID BY: CUSTOMER

AGENCY \_\_\_\_\_

DEPOSIT TRANSFER FROM \_\_\_\_\_

SERVICES	
ELECTRIC	
SENIOR DISCOUNT	
SECURITY LIGHT	
GAS	
WATER	
STEAM	
SEWER	
GARBAGE LANDFILL	
HYDRANT METER	

OFFICE USE ONLY	
Taxable <input type="checkbox"/>	Tax Exempt <input type="checkbox"/>
Residential <input type="checkbox"/>	Commercial <input type="checkbox"/>
Meter Reading Schedule	<input type="checkbox"/>
Direct Pay	<input type="checkbox"/>
Equal Pay	<input type="checkbox"/>
Presort	<input type="checkbox"/>
Copy Purchase Agreement	<input type="checkbox"/>

**NEAREST RELATIVE NOT LIVING WITH YOU**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY STATE \_\_\_\_\_

PHONE \_\_\_\_\_

PUT IN OWNER'S NAME WHEN VACATED  INITIALS

SIGNATURE \_\_\_\_\_

2ND SIGNATURE \_\_\_\_\_

CUT IN DATE \_\_\_\_\_ APPT TIME \_\_\_\_\_

SPECIAL INSTRUCTIONS \_\_\_\_\_

**APPLICATION FOR SERVICE - PLEASE READ**

The Undersigned responsible person(s) hereby make application to the Hibbing Public Utilities Commission of the City of Hibbing for the supply of Electricity, Water, Gas and Steam, for use upon the premises for the Service Address provided. Customers who pay deposits earn annual interest on the deposit money which is credited to the account yearly in January. This deposit is kept for 2 years of good credit and will be applied to the final bill when moving out.

Consumption shall be measured by meters installed by said Hibbing Public Utilities Commission, and hereby agrees to use said electricity, water, gas, steam meters strictly in accordance with the rules and regulations of said Public Utilities Commission, which rules and regulations are as truly a part of this application as though printed hereon in full.

I have read the above information.
initial

DEPOSIT PAID ON (DATE)

Application Taken by \_\_\_\_\_

**HYDRANT METER APPLICATION**

- A Non-refundable **Hydrant Fee of \$75.00** per installation of each hydrant meter shall be paid prior to receiving hydrant meter.
- The user will notify Customer Service at 218-262-7712 to request removal of the hydrant meter when it is no longer needed.
- The customer will be billed at the current rate per unit of water (1000 gallons per unit) and Water Base Charges.
- The hydrant is not to be used after **November 1st**, and returned to the HPU Meter Shop.

By signing below, you accept the terms and conditions as well as all charges for service provided by the Hibbing Public Utilities.

Authorized by: \_\_\_\_\_ Date: \_\_\_\_\_

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